ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION .	INITIALS	ID NO.	DATE
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FORMALITY REVIEW	TAMB	M0916	17-27-00
RESPONSE FORMALITY REVIEW	<u> </u>		

INDEX OF CLAIMS

~	Rejected	N	Non-elected
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If more than 150 claims or 10 actions staple additional sheet here